



Department of Medical Assistance Services
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MEDICAID MEMO

TO: All Providers and Managed Care Organizations (MCOs)
Participating in Virginia Medical Assistance Programs

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO Special
DATE 8/9/2005

SUBJECT: Expansion of Managed Care Organization (MCO) Program in Northern
Virginia

The purpose of this memorandum is to inform you of the entry of the newest MCO into the Virginia Medicaid/FAMIS programs. DMAS is pleased to announce that AMERIGROUP, Inc. (www.amerigroupcorp.com), which is located in Virginia Beach, Virginia, will be entering the Northern Virginia region on September 1, 2005. Approximately 80,000 Medicaid and FAMIS managed care eligible enrollees will be affected in the following localities:

Alexandria	Arlington	Fairfax City	Fairfax County	Falls Church
Fauquier	Loudoun	Manassas City	Manassas Park	Prince William

Medicaid's MCO program began on January 1, 1996, as a managed care initiative for the Virginia Medical Assistance Program. The current managed care programs now cover Medicaid and FAMIS populations in 103 localities in the Commonwealth of Virginia and have undergone expansions in 1997, 1999, 2000, and 2001. DMAS has operated the Medicaid and FAMIS MCO programs in Northern Virginia since 2001 with the entry of UniCare Health Plan of Virginia. The MCO programs have resulted in some significant health outcome achievements that are detailed in the *Virginia Managed Care Performance Report 2003-2004* at www.dmas.virginia.gov/downloads/pdfs/mc-2004_annual_report.pdf.

With the entry of AMERIGROUP, Inc. into the region, managed care eligibles in Northern Virginia will now have a choice between UniCare Health Plan of Virginia and AMERIGROUP, Inc. Managed care provides recipient choice, improved health outcomes, and program stability.

IMPACT OF MCO EXPANSION ON PROVIDERS

The introduction of a second MCO into a region means the end of the MEDALLION Primary Care Case Management program in these areas. The MEDALLION program ended in the

Northern Virginia localities noted above on June 30, 2005, and will no longer be an option for recipients in those localities. All Medicaid managed care eligible individuals in the affected localities, who were formerly enrolled in MEDALLION, have been returned to fee-for-service (regular) Medicaid until September 1, 2005. At that time, they will be enrolled with either AMERIGROUP, Inc. or UniCare Health Plan of Virginia. Those individuals currently enrolled with UniCare Health Plan of Virginia will remain with UniCare without disruption.

Each MCO is responsible for the development of its provider network. Providers are encouraged to contract with one or both MCOs to continue serving the Medicaid managed care population. Providers who were serving enrollees under the MEDALLION program must contract with one or both of the MCOs in order to continue serving Medicaid managed care recipients.

If AMERIGROUP, Inc. or UniCare Health Plan of Virginia has not already contacted you, DMAS encourages providers to contact the MCOs to begin the contracting and credentialing process. Please be aware that credentialing may take up to 90 days. If you wish to contract with the Northern Virginia MCOs, please contact AMERIGROUP, Inc. at 1-888-821-1108 and UniCare Health Plan of Virginia at 1-888-229-3872. If you are already a UniCare Health Plan of Virginia participating provider, there will be no changes to your UniCare contract.

To assist in the transition process, DMAS will be providing the MCOs with Medical Transition Reports. These reports will reflect individuals receiving certain medical services such as durable medical equipment, pregnancy services, and dialysis among others. This information will assure that services with authorizations, etc., are transferred to the MCOs without disruption.

Providers will be able to identify recipients enrolled in an MCO by their member ID card. Recipients may call the MCO to request replacement cards if needed. If a Medicaid recipient seeks services, you should always ask for their MCO member ID card and plastic Medicaid card. These cards will help you verify eligibility. In the expansion areas, those individuals enrolled in MCOs will carry a card bearing the name of one of the following plans:

AMERIGROUP, Inc.:	1-800-600-4441
UniCare Health Plan of Virginia:	1-888-817-6615 (Medicaid) 1-877-423-2647 (FAMIS)

Both AMERIGROUP, Inc. and UniCare Health Plan of Virginia list the recipient's Medicaid number on the MCO ID card.

NOTE: The contents of this memo in no way affect or relate to the *Smiles For Children* program.

IMPACT OF MCO EXPANSION ON ENROLLEES

There are certain groups of Medicaid recipients who are exempt from MCO participation. These individuals will continue to be served through Medicaid's fee-for-service program. These individuals include, but are not limited to, recipients in nursing facilities; recipients in

Intermediate Care Facilities for the Mentally Retarded; recipients enrolled in Home- and Community-Based Waiver programs; and recipients who have other comprehensive group or individual health insurance, including Medicare. Providers should continue treatment of these individuals without interruption.

On September 1, 2005, all managed care eligibles in the Northern Virginia localities will be enrolled in either UniCare Health Plan of Virginia or AMERIGROUP, Inc. Letters for recipients impacted by the expansion (former MEDALLION and current fee-for-service enrollees who are not exempt) were mailed in late July. These letters provide the recipient with a choice of the two health plans. If the recipient does not make an affirmative choice, he/she will be assigned to the contracted MCO listed in the letter. Recipients will be instructed to contact the Managed Care HELPLINE with questions related to their MCO assignment, or to make changes in their assignment during the enrollment period. The Managed Care HELPLINE assists recipients in selecting a plan, in addressing and documenting members' concerns, and in completing health assessment status surveys that are forwarded to the assigned/chosen MCO only. Recipients may contact the Managed Care HELPLINE at 1-800-643-2273 or find more information on Managed Care on the DMAS website at www.dmas.virginia.gov/mc-home.htm.

We appreciate your continued support of these programs. If you have questions about this memo, please contact Kathleen Dickerson at 1-804-371-8852.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the Provider Column to find Medicaid and SLH Provider Manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

“HELPLINE”

The “HELPLINE” is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays, to answer questions. The “HELPLINE” numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the “HELPLINE” is for provider use only. Please have your Medicaid provider identification number available when you call.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include upcoming changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.